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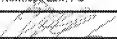
Total Number of Pages in This Submission 2

Application Number	10/668,049
Filing Date	9/22/2009
First Named Inventor	THEEL, Julie
Art Unit	3711
Examiner Name	HYLINSKI, Alyssa Marie
Attorney Docket Number	Three PerToy

**ENCLOSURES (Check all that apply)**

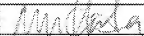
- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Fee Transmittal Form  | <input type="checkbox"/> Drawing(s)                                       | <input type="checkbox"/> After Allowance Communication to TC                            |
| <input type="checkbox"/> <input type="checkbox"/> Fee Attached                                     | <input type="checkbox"/> Licensing-related Papers                         | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
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| <input type="checkbox"/> <input type="checkbox"/> After Final                                      | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> <input type="checkbox"/> Affidavits/declaration(s)                        | <input checked="" type="checkbox"/> Power of Attorney, Revocation         | <input type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Extension of Time Request   | <input type="checkbox"/> Change of Correspondence Address                 | <input type="checkbox"/> Other Enclosure(s) (please identify below):                    |
| <input type="checkbox"/> Express Abandonment Request   | <input type="checkbox"/> Terminal Disclaimer                              |   |
| <input type="checkbox"/> Information Disclosure Statement  | <input type="checkbox"/> Request for Refund                               |   |
|  | <input type="checkbox"/> CD, Number of CD(s) _____                        |   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)                                    | <input type="checkbox"/> Landscape Table on CD                            |   |
| <input type="checkbox"/> Reply to Missing Parts/Incomplete Application                             | <input type="checkbox"/> Remarks  |   |
| <input type="checkbox"/> <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | Filed in EFS Web January 4, 2010  |   |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Newhope Law, PC	
Signature		
Printed name	Clement Cheng	
Date	1-4-2010	Reg. No. 45483

**CERTIFICATE OF TRANSMISSION/MAILING**

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Signature		
Typed or printed name	Allison Harte	Date 1-4-2010

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: **Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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